

DECLARATION AND POWER OF ATTORNEY FOR UTILITY OR DESIGN PATENT APPLICATION (37 CFR 1.63)	Attorney Docket Number	CCS5006USNP	
	First Named Inventor	Rosie Louis Habeshaw et al.	
	<i>COMPLETE IF KNOWN</i>		
	Application Number	Not Yet Assigned	
	Filing Date	May 8, 2006	
	Group Art Unit	Not Yet Assigned	
	Examiner Name	Not Yet Assigned	

☐ Declaration Submitted with Initial Filing ☒ Declaration Submitted after Initial Filing (Surcharge (37 CFR 1.16(e)) required) OR

As a below named inventor, I hereby declare that:

My residence, mailing address, and citizenship are as stated below next to my name.
I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled:

INJECTION DEVICE
(Title of the Invention)

the specification of which

☒ is attached hereto

OR

☐ was filed on as United States Application Number or PCT International Application Number and was amended on (MM/DD/YYYY)

I hereby state that I have reviewed and understand the contents of the above identified specification, including the claims, as amended by any amendment specifically referred to above.

I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR 1.56, including for continuation-in-part applications, material information which became available between the filing date of the prior application and the national or PCT international filing date of the continuation-in-part application.

I hereby claim foreign priority benefits under 35 U.S.C. 119(a)-(d) or 365(b) of any foreign application(s) for patent or inventor's certificate, or 365(a) of any PCT international application which designated at least one country other than the United States of America, listed below and have also identified below, by checking the box, any foreign application for patent or inventor's certificate, or any PCT international application having a filing date before that of the application on which priority is claimed.

Prior Foreign Application Number(s)	Country	Foreign Filing Date (MM/DD/YYYY)	Priority Not Claimed	Certified Copy Attached?	
				YES	NO
CCS5006 CCS5006	GB PCT	MAY 24, 2004 September 27, 2005	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>

☐ Additional foreign application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto:

DECLARATION - Utility or Design Patent Application		
I hereby claim the benefit under 35 U.S.C. 119(e) of any United States provisional application(s) listed below.		
Application Number(s)	Filing Date (MM/DD/YYYY)	<input type="checkbox"/> Additional provisional application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto.
I hereby claim the benefit under Title 35, United States Code, § 120 of any United States application(s) listed below and, insofar as the subject matter of each of the claims of this application is not disclosed in the prior United States application in the manner provided by the first paragraph of Title 35, United States Code, § 112, I acknowledge the duty to disclose material information as defined in Title 37, Code of Federal Regulations, § 1.56(a) which occurred between the filing date of the prior application and the national or PCT international filing date of this application:		
Application Serial No.	Filing Date	Status
I hereby appoint: <div style="display: flex; justify-content: space-between; align-items: flex-start; margin-top: 10px;"> <div> <input checked="" type="checkbox"/> Practitioners at Customer Number 000027777 → </div> <div style="text-align: right;"> Place Customer Number Bar Code Label Here </div> </div> <p style="margin-top: 10px; text-align: center;">AND</p> <div> <input checked="" type="checkbox"/> Practitioner(s) named below: </div> <div style="display: flex; justify-content: space-between; margin-top: 5px;"> <div> <u>Name</u> Dean L. Garner </div> <div> <u>Registration Number</u> 35,877 </div> </div>		
as my/our attorney(s) or agent(s) to prosecute the application identified above, and to transact all business in the United States Patent and Trademark Office connected therewith.		
Address all telephone calls to Dean L. Garner at telephone number (513) 337-8559.		
Direct all correspondence to: <div style="display: flex; align-items: center; margin-left: 10px;"> <div style="text-align: center;"> Customer Number <input checked="" type="checkbox"/> or Bar Code Label </div> <div style="border: 1px solid black; padding: 2px 10px; margin: 0 5px;">000027777</div> <div style="margin: 0 10px;">OR</div> <div> <input type="checkbox"/> Correspondence address below </div> </div>		
Name:		
Address:		
Address:		
City:	State:	ZIP
Country	Telephone:	Fax:

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.			
NAME OF SOLE OR FIRST INVENTOR:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle [if any]) Rosie Louis		Family Name or Surname Habeshaw	
Inventor's Signature		Date	
Residence: 84A Blinco Grove, Cambridge CB17TS	State GB	Country GB	Citizenship GB
Mailing Address: 84A Blinco Grove, Cambridge CB17TS			
City: Switzerland	State Oh	ZIP 45140	Country GB
I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.			
NAME OF SECOND INVENTOR:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle [if any]) David Maxwell		Family Name or Surname Johnston	
Inventor's Signature		Date	
Residence: 12134 East Run Drive	State NJ	Country US	Citizenship US
Mailing Address 12134 East Run Drive			
City Lawrenceville	State NJ	ZIP 08648	Country US
I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.			
NAME OF THIRD INVENTOR:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle [if any]) .		Family Name or Surname	
Inventor's Signature		Date	
Residence: City	State	Country	Citizenship
Mailing Address			
City	State	ZIP	Country